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Division of Corporations

**L23000081834**

## Florida Department of State

Division of Corporations

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To:

Division of Corporations

Fax Number : (850)617-6381

From:

Account Name : GREENSPOON MARDER, P.A.

Account Number : 076064003722

Phone : (888)491-1120

Fax Number : (954)333-2132

\*\*Enter the email address for this business entity to be used for future annual report mailings. Enter only one email address please.\*\*

Email Address: eholzer@ascendo.com

## FLORIDA LIMITED LIABILITY CO.

Ascendo Box, LLC

Certificate of Status	0
Certified Copy	0
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Estimated Charge	\$125.00

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**ARTICLES OF ORGANIZATION  
OF  
ASCENDO BOX, LLC**

**ARTICLE I - Name:**

The name of the Limited Liability Company is Ascendo Box, LLC

**ARTICLE II - Duration:**

The period of duration for the Limited Liability Company shall begin with the filing of these Articles with the Florida Department of State, and shall exist perpetually, unless sooner dissolved in accordance with the Operating Agreement of the Limited Liability Company or Florida law.

**ARTICLE III - Address:**

The mailing address and street address of the principal office of the Limited Liability Company is 500 W. Cypress Creek Road, Suite 230, Fort Lauderdale, Florida 33309.

**ARTICLE IV - Registered Agent:**

The name and address of the initial registered agent for this Limited Liability Company is Greenspoon Marder LLP, 200 E. Broward Blvd., Suite 1800, Fort Lauderdale, Florida 33301.

**ARTICLE V - Management:**

The Limited Liability Company is to be managed by a manager and the name and address of the initial manager who is to serve as manager is:

Waresuites, LLC  
848 Brickell Avenue, Suite 1000  
Miami, Florida 33131

The manager of this Limited Liability Company: (i) may be replaced by the members, and (ii) shall be elected by the members, as provided for in the Operating Agreement of this Limited Liability Company.

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Whereof, the undersigned has executed these Articles of Organization this 21<sup>st</sup> day of February, 2023.

A handwritten signature in cursive script, appearing to read "Ellen Gilmore", written over a horizontal line.

Ellen Gilmore,  
Authorized Representative of Member

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CERTIFICATE OF DESIGNATION OF  
REGISTERED AGENT/REGISTERED OFFICE

PURSUANT TO THE PROVISIONS OF SECTION 605.0113, FLORIDA STATUTES,  
THE UNDERSIGNED LIMITED LIABILITY COMPANY SUBMITS THE FOLLOWING  
STATEMENT IN DESIGNATING THE REGISTERED OFFICE/REGISTERED AGENT, IN THE  
STATE OF FLORIDA.

1. The name of the Limited Liability Company is:

Ascendo Box, LLC

2. The name and address of the registered agent and office is:

Greenspoon Marder LLP (the "Firm")  
200 E. Broward Blvd., Suite 1800  
Fort Lauderdale, Florida 33301

By: Ellen Gilmore  
Ellen Gilmore, For the Firm

*Having been named as registered agent and to accept service of process for the above stated Limited Liability Company at the place designated in this certificate, the Firm hereby accepts the appointment as registered agent and agrees to act in this capacity. The Firm further agrees to comply with the provisions of all statutes relating to the proper and complete performance of its duties, and the Firm is familiar with and accepts the obligations of its position as registered agent.*

Ellen Gilmore  
Ellen Gilmore, For the Firm (Signature)

February 21, 2023  
(Date)

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